ı.	
Ţ	
4	
i.	
Ī.	
<u> </u>	
F	:
E	
<u> </u>	
Ŋ	
o	

•		
Please type a plus sign (+) inside this box	PTO/SB/01 (12-97)	٠.
	Approved for use through 9/30/00. OMB 0651-0032	-+
	Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE	
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collect	ion of information unless it contains a valid OMB control number.	

2501 4245101	Attorney Docket Nun	nber	3407.2			
	I FOR UTILITY OR SIGN	First Named Inventor	r	Siani-Rose et al.		
	PPLICATION	COMPLETE IF KNOWN				
(37 C	FR 1.63)	Application Number		1		
☑Declaration Submitted OR	Declaration Submitted after Initial	Filing Date	TBD)		
With Initial	Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit	TBD			
riing		Examiner Name	TBD)		
With Initial Filing	(37 CFR 1.16 (e))	· · · · · · · · · · · · · · · · · · ·	H		_	

My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural name are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: COMPUTER SOFTWARE FOR AUTOMATED ANNOTATION OF BIOLOGICAL SEQUENCES									
are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: COMPUTER SOFTWARE FOR AUTOMATED ANNOTATION OF BIOLOGICAL									
the specification of which (Title of the Invention)									
☑ is attached hereto									
OR									
□ was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number and was amended on (MM/DD/YYYY) (if applicat									
I hereby state that I have reviewed end understend the contents of the abova identified specification, including the claims as amended specifically referred to above.									
I acknowledga the duty to disclosa information which is material to patantability as defined in 37 CFR 1.58									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed balow and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Foreign Filing Dete Priority Certified Copy Attache									
Number(s) Country (MM/DD/YYYY) Country Not Claimed YES NO									
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
ApplicationNumber(s) Filing Date (MM/DD/YYYY)									
G0/285,144 April 19, 2001 Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.									

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

APP_ID=09683264

lease type a plus sign (+) inside this box	\rightarrow	\Box	l
tease type a plus sign (+) inside this box			ı

PTO/S8/01 (12-97)

Approved for use through 9/30/00. OMB 0851-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

	DECLARATION — Guilty of Besign Catenor Approximate												
	I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365© of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT International filling date of this application.												
	U.S. Parent A	pplicat Numl		Parent		Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)			
ŀ	60/285,144 60/285,403				April 19, 2001 April 20, 2001								
Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached I									ched hereto.				
Ì	As a named invent	or I here!	v annoint the	following re	aistered pra	ctitioner(s)	to prosec	ute this	application	and to t	ransact all t	ousiness in the	
	Patent and Tradem therewith			Custon	ner Number	L				Place Custo Number Bar Label he			
				⊠ Registe	ered practition	oner(s) na	ne/registra	tion nu	mber listed	below L			
Į.	Na	ame			istration lumber			Na	me			istration umber	
	Vem	Norviel		;	32,483		Phi	lip L. N	<i>AcGarrigie</i>				
ICT	•	Zhou	_		44,419 37,505			Alan B	. Sherr				
П	Joe Liel	Deschue	1Z			gistered P	rectitioner	Informa	etion sheet f	PTO/SB	/02C attach	ed hereto.	
- L	□ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. Direct all correspondence to: □ Customer Number or Bar Code Label □ CR □ Correspondance address below												
17.55	Name	Affymei	rix Inc.										
7	Name Affymetrix, Inc. Address General IP Counsel - Legal Department												
77.	Address	3380 C	entral Expres	sway									
H.J.	City	Santa (Clara	••			State	CA		ZIP	95051		
÷	Country	USA		Teleph	none 408/731-5000				Fax 408/731-5392			392	
	I hereby declare the believed to be true punishable by fine application or any	; and furti or imprise	ner that these onment, or bo										
	Name of Sole] A petiti	on has	s been filed	for thi	s unsigned	inventor	
	Given		first and mid	ldle [if any])			Fa	mily Name		name		
			Michael A.	A					Siani-	HOSE			
	Inventor's Signature Michael 1 Fum - Rose Date 12-5-								12-5-0				
	Residence: City San CA Country USA Citizenship USA												
	Post Office Address 341 Day Street												
	Post Office Add						- ₁						
	City		San Franci sco	State	CA	ZIP	9413	1	Country	, us	A		
	Additional Inv	entors ar	e being nam	ed on the 1	supplemen	tal Additio	nal inven	tor(s) s	heet(s) PT	0/88/02	A attached	hereto.	

Please type a plus sign (+) Inside this box > +

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any]) Family Name or Surname								е		
Ron										
Inventor's Signature	Then Sho				fe					
Residence: City	Berkeley	State	CA	Countr	y	USA	Cit	izenship	u.s.	
Post Office Address										
Post Office Address	1213 San Pablo								·	
City	Berkeley	State	-CA	ZIP	947	10	Country	USA		
Name of Additional J	oint inventor, if any:			- A	etitic	n has been file	d for this u	nsigned i	nventor	
Given Na	ame (first and middle	if any])				Fam	ily Name o	r Surnair	ne	
										
Inventor's Signature Date										
Residence: City		State		Count	, y		Cit	izenshlp		
Post Office Address										
Post Office Address										
City	-	State		Zip			Country	,		
Name of Additional J				- A	petitic	on has been file	d for this u	nsigned i	nventor	
Given Na	me (first and middle [i	f any])		Family Name or Surname						
	· · · · · · · · · · · · · · · · · · ·									
Inventor's Signature					- Date					
Residence: City		State					Cittle	Citizenship		
Post Office Address					_					
Post Office Address	<u> </u>									
City	<u> </u>	State			lp_		Count		ds of the individual case. An	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Page 6 of 6